Initial: 9/92

Reviewed/revised: 2/23/13

Revision: 3

MILWAUKEE COUNTY EMS PRACTICAL SKILL LABOR/DELIVERY VERTEX PRESENTATION

Approved by: M. Riccardo Colella, DO, MPH, FACEP
Page 1 of 1

Purpose: Indications:

To monitor and assist in the obstetrical delivery of an infant in the vertex position Patients in labor with imminent delivery and infant in the vertex position

Examine external perineum for presenting part to determine imminent delivery; if not, begin transport

Begin transport regardless of progress of labor for women whose history and/or physical assessment indicate potential complications (vaginal bleeding, abnormal vital signs, etc.)

Position patient supine with legs flexed, protecting patient's privacy as much as possible

Place absorbent material under patient's buttocks

Begin transport if mother shows signs of: hypertension, hypotension, tachycardia > 120/min, decrease in intensity or frequency of contractions, contractions lasting longer than 70 seconds, vaginal bleeding

Open obstetrical kit, maintaining sterility; start IV; run at keep-open rate unless volume replacement is indicated

Observe color/content of amniotic fluid; anticipate airway problems in newborn if meconium staining is present

Maintain gentle pressure against emerging fetal head to prevent explosive delivery

If cord is looped around infant's neck, attempt to slide cord over body as infant delivers; cutting cord is not recommended until infant is delivered

Gently guide infant's head downward to deliver top shoulder, then upward to deliver bottom shoulder; using a clean towel, maintain secure grip on infant as body is delivered

Complete newborn assessment and care, recording time of birth and sex of infant

Place 2 clamps at least 10 inches from infant's abdomen on cord; cut between clamps, using scalpel in OB kit

Clean infant's face; suction mouth and nose as needed

Dry infant's skin; wrap in warm, dry blankets; cover head, leaving face exposed

Massage maternal abdomen to facilitate contraction of uterus and separation of placenta; do not pull on cord to deliver placenta; when gush of blood indicates separation, instruct mother to "push"

Place placenta in container and bring with mother and infant to hospital

Transport mother and infant together, continuously monitoring both

NOTE:

Acquire APGAR score at one and five minutes after birth

CRITERIA	0 POINTS	1 POINT	2 POINTS
Appearance (color)	Cyanotic	Body pink, extremities cyanotic	Pink
Pulse	Absent	Less than 100/minute	More than 100/minute
Grimace (response to suctioning)	None	Weak	Vigorous
Activity (muscle tone)	Limp	Weak	Vigorous
Respiratory Effort	None	Slow, irregular	Strong, crying